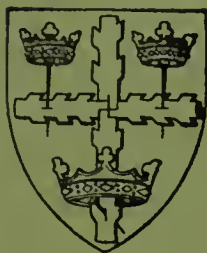


NOV 1961 ARSD

BOROUGH OF



COLCHESTER

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# ANNUAL REPORT

OF THE

## MEDICAL OFFICER OF HEALTH

JOHN D. KERSHAW

M.D., B.S., London ; M.R.C.S., England :

L.R.C.P., London, D.P.H.

MEDICAL OFFICER OF HEALTH

PORT MEDICAL OFFICER

DIVISIONAL SCHOOL MEDICAL OFFICER

AREA MEDICAL OFFICER

CONSULTANT IN INFECTIOUS DISEASES

MYLAND HOSPITAL, COLCHESTER

**1960**

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BOROUGH OF



COLCHESTER

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BOROUGH AND PORT HEALTH COMMITTEE, 1960

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THE RIGHT WORSHIPFUL THE MAYOR

COUNCILLOR I. T. BROWN

*Chairman :*

COUNCILLOR I. T. BROWN

*Deputy-Chairman :*

COUNCILLOR MRS. G. B. ENOCH

*Members :*

ALDERMAN MISS K. E. SANDERS, A.R.R.C., J.P.

COUNCILLOR BRIGADIER D. F. PANTON, C.B.E.

ALDERMAN C. E. CHILD

COUNCILLOR C. W. PELL

COUNCILLOR W. C. LEE

COUNCILLOR W. E. SANDFORD

**PART-TIME STAFF**

*Medical Officer of Health, etc. :*

JOHN D. KERSHAW, M.D., B.S.(LOND.), D.P.H.

*Assistant Medical Officers :*

ELEANOR M. SINGER, M.SC., M.R.C.S., L.R.C.P., D.C.H.

W. A. GARSON, L.M.S.S.A.

*Public Analyst :*

J. E. WOODHEAD, B.SC., F.I.C., PH.C.

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**WHOLE-TIME STAFF**

*Senior Public Health Inspector :*

†\* L. H. ENGLAND

*Deputy Senior Public Health Inspector :*

†\* O. R. WARNER

*Additional Public Health Inspectors :*

†\* C. J. JACOBI                      † E. R. SWIFT

† R. G. MORLEY                      †\*P. CUTTS

† Public Health Inspector's Certificate.

\* Meat Inspector's Certificate.

*Clerk-trainee Inspector :*

M. J. KING (from 15.2.60)

*Clerks :*

R. D. SARGEANT, A.C.C.S.

L. G. NICHOLLS

M. ROWLAND (to 10.9.60)

M. BARNARD

R. A. WILLSMORE

(from 19.9.60)

(from 12.12.60)

*Disinfector :*

A. E. CUDMORE

*Rodent Operator :*

W. I. HAWKINS

Telephone No.  
Colchester 5101, Extns. 8 and 73  
(Night line 73107)

HEALTH DEPARTMENT,  
TRINITY STREET,  
COLCHESTER.  
16th October, 1961.

MR. MAYOR, LADIES AND GENTLEMEN,

I have the honour to present to you my Annual Report for the year 1960.

**Vital Statistics**

As I have commented in previous reports, the statistics for a single year can sometimes be very misleading and certain “key” figures are best judged over a period. The following is a five-year table of what have long been considered the most useful indicators in judging the healthiness of an area and the effectiveness of its services.

	1956	1957	1958	1959	1960
Birth Rate .. .. .	15.67	16.4	16.8	16.9	16.9
Death Rate .. .. .	10.7	9.7	9.8	10.9	9.1
Infant Mortality Rate ..	16.5	14.9	17.0	19.7	18.0
Number of Maternal Deaths	1	—	—	—	—

From these it is clear that at present the birthrate seems to be settling down at just under 17 per thousand population, a shade lower than the national average of 17.1. The death rate is running in the region of 10 per thousand, whereas the national rate for 1960 is 11.5. The national infant mortality rate has reached a new low record of 21.7 in 1960; Colchester has been substantially below that figure for some years. These figures are all gratifying, but though I doubt whether there will be any great rise in the birthrate or fall in the deathrate in the near future, we ought, before long, to be able to get the infant mortality rate steady at something like 16.

**Infectious Diseases**

To the 108 cases of scarlet fever formally notified must be added ten cases detected through the schools or otherwise, making the largest total in the borough since 1943. In general, however, the infection was of a mild type and responded readily to home treatment with antibiotics; only one patient was admitted to hospital suffering from this disease. The incidence of whooping-cough was also unusually high (the highest since 1953) though this was to be expected after the very low figures of the previous two years. It was

interesting to note that although a few of the children who contracted the disease had been immunised against it the incidence among the immunised was much lower than among the non-immunised and the immunised children had the disease in a very mild form. This is in accordance with the claims which have been made for whooping-cough immunisation over the years and should encourage parents to take advantage of immunisation.

For the ninth consecutive year there was not a single case of **diphtheria**. I would, however, once again warn the public that complacency is dangerous. There have been fatal cases in London and elsewhere in the past few months and it is always probable that sooner or later the infection will be brought to Colchester. It is too late to start immunising children when an outbreak has actually begun. Parents have been good in responding to the offer of poliomyelitis vaccination; I wish they would be equally far-sighted where diphtheria immunisation is concerned.

The **measles** figures show an apparent drop as compared with 1959, but they tell only part of the story. The measles epidemic began in the last weeks of the year and built up to its peak in the first few months of 1961, so that when the 1961 figures come to be analysed and related to those of 1960, the epidemic total for the whole winter will be in the region of 900. It must, however, be remembered that the incidence of measles was unusually heavy all over the country and though there were a few very severe cases locally the disease was in general mild in form.

## Care of the Elderly

In my last report I wrote of various important things which we might do to help elderly people to maintain their health and independence as long as possible.

The advisory clinic, though its work is growing only slowly, has progressed far enough to show that it can be useful and has considerable potentialities. The Ministry of Health, which had for many years been adamant in refusing to allow any extension of chiropody services for the elderly, underwent a change of heart and a county council chiropody clinic was set up. It is ultimately intended to provide a full chiropody service, at any rate for the elderly and the handicapped, in clinics, in hostels and, where the patient is confined to his or her house, in the home, but the present shortage of chiropodists will prevent this development from being fully realised quickly. I should like to pay tribute here to the voluntary organisations which have kept a basic chiropody service going for old people for a number of years with only a modest subsidy from the local authority. Much time and trouble has been generously given in this cause and I hope that as the time comes when the local authority service takes over the whole of the work the voluntary organisations will have the comfort of knowing that it is because they pointed the way that the community is now



recognising the need. It is the British custom to let voluntary effort make the social experiments and explore the need and the means before the state and the local authority move in to consolidate. If anyone should feel "displaced" by the development of the local authority chiropody service, there are plenty of new fields of enterprise for helping the elderly still to be ploughed and sown.

The hoped-for "meals on wheels" service has started, in a small way at first, as a combined operation among various voluntary organisations. The ingenuity of the experimental scheme is commendable and though other methods may have to be used in some parts of the town there are some districts where the service can be developed on the lines already tried. The readiness—in fact, the eagerness—of the Health Committee and the Council to give some financial aid to the scheme promises well.

The "foul laundry" service was the subject of some preliminary talks during the year and there is good reason to expect that we shall be providing something on these lines either before the end of 1961 or early in 1962. There will be some scope for voluntary effort in this work, but the most serious problems will probably be economic (including the cost of transport).

Our flatlets for the elderly, I am sorry to say, remain an unfulfilled ambition and I know that I am not alone in regretting that, though the idea has been acceptable in principle for three years or more, Colchester is standing by while more and more other local authorities are moving forward. There are, of course, manifest practical difficulties of which not the least is the finding of a suitable site not too far from the town centre, but none of the difficulties need be insuperable if we really make up our minds that something shall be done.

## **Food Hygiene**

The fact that only one case of suspected food poisoning was notified in Colchester during the year might be taken as evidence that food hygiene standards were on the highest level. How misleading figures can be is emphasised by another paragraph in the body of the report which relates to the thirty persons taken ill after a school meal and includes the comment that none of the cases was notified, though "suspected food poisoning" would be the obvious diagnosis! I have no doubt that hundreds, if not, indeed, thousands, of cases of mild food poisoning occurred in the town, but the average case clears up quickly, often within 24 hours, and very often the doctor is not called in.

The commonest cause is contamination by the staphylococcus, a germ which is often found in boils, septic spots, infected cuts and even in the nose or throat of a person who has been suffering from a cold or catarrh. It is often present in dust. It is obvious that the slightest carelessness may cause the germs to find their way on to food, where they multiply and produce toxins. Cooking of the

food usually kills the germs but leaves the toxins unchanged and whoever eats the toxin-containing food is likely to be stricken down with acute vomiting and diarrhoea. A housewife may thus poison her family with meat kept overnight and served either cold or re-heated in "shepherd's pie," a not uncommon occurrence, especially if there is no refrigerator or cold larder. The damage which the careless or casual caterer or food shop assistant can do is obviously many times greater, yet far too much food in the shops is still left exposed to contamination by coughing customers or by dust, and shop assistants who handle cash—which is usually dirty—or scratch an itching spot or run their fingers through their hair will often handle food with their fingers instead of taking the trouble to use tongs.

In my report for 1957, I referred to the case of a fish shop in the centre of the town where we had the strongest possible evidence that staphylococcal contamination of exposed fish, almost certainly by dust, had occurred and had, indeed, caused at any rate one case of poisoning of the type mentioned above. The firm was first approached in the autumn of 1956 and in 1957, I was assured that the shop was "scheduled for conversion," it being expected that the work would be started early in 1958. Nothing having happened by July, 1958, I made further enquiries and was informed that the firm concerned was looking for an alternative site with the intention of closing the old shop and opening a new one. In June, 1959, I sent to the firm what was becoming an annual reminder letter. This produced an interview with the Area Manager, but no concrete consequences—the firm could not agree that the fitting of a glass window would effect any improvement and they were not ready to go to the expense of installing refrigerated display cabinets in the existing premises.

They did, however, say that the matter might be solved in the course of their modernisation programme, which was to be completed by the end of 1962. Up-to-date information (July, 1961) is that the Colchester shop is one of 116 branches still to be modernised and that the search for a suitable new site has not yet been successful. Meanwhile things are as they were in 1956; the only comment I feel inclined to make is that I hope that before I retire from the Council's service in 1970, either something will have been done by the firm of its own accord, or the Food Hygiene Regulations will have been strengthened so as to allow us to take stronger action.

I stress this case because it is an example of the way in which a large and wealthy national commercial organisation may sometimes view matters of food hygiene; any observant Colcestrian will know that there are much smaller and less wealthy concerns which have had modern and more hygienic food display apparatus in use for years. There are similar variations in many types of food shops. Some big firms with multiple shops are prepared to waste considerable amounts of stock rather than put the public to the slightest risk, but others are less scrupulous and it is possible for a firm's



centrally directed policy in food hygiene to be frustrated by careless branch management. The "little shop at the corner" is no more likely to be dangerous than the big store and may, indeed, be more susceptible to this department's persuasion in the right direction

Two new hazards which first came to light in 1960 are worth brief mention. Sampling of liquid egg from a local establishment revealed salmonella, in some cases of a type which might cause food poisoning, in 15 out of 79 samples. The bringing together of eggs from all parts of the country and their mixing during processing undoubtedly creates a definite risk of dangerous contamination and while cooking is quite likely to kill off the bacteria the possibility of serious trouble cannot be ignored. The Ministry of Health and the Egg Marketing Board are trying to develop facilities for pasteurising liquid egg by a method which will not affect the egg's usefulness in cooking; only something of this kind will eliminate all the risks.

The second new hazard arose in desiccated coconut. Tests in other parts of the country having shown that this substance as imported from certain foreign countries contained food poisoning organisms, we investigated stocks in hand in various local authority establishments such as school canteens and found a small number of instances of contamination. All batches of coconut in which contaminated specimens had been found were put out of use and we have no evidence that any illness was caused in Colchester by this food. Steps have been taken nationally and internationally to eliminate this potential danger.

### Delegation of Functions

As from 1st April, 1961, Colchester has taken over from the County Council certain health and welfare functions. Considerable time was taken during 1960 to work out the details of the scheme of delegation and it is appropriate to indicate in this report what differences are likely to be made in the Borough's health work in consequence.

The original White Paper of 1957, in which the Government put forward the idea talked of "a full and free measure of delegation". The Local Government Act of 1958, however, made it clear that the words "full and free" were not in danger of being interpreted over-literally and when, in due course, the Minister of Health produced the "model schemes" which were to be used as a basis by the local authorities, it began to appear that the so-called delegation schemes were little more than agency agreements. Policy and finance remain subject to county council control and the staff employed in the work of the delegated functions remain essentially County Council officers. However, schemes and agreements are not merely words on paper but have a spirit as well and at the time of writing it would seem that the Essex County Council is disposed to interpret delegation policy generously and to give in practice appreciably

more than the strict letter of the scheme requires. If the present understanding and good feeling continues on both sides, the prospects are encouraging.

Under the scheme the Borough Council will now be responsible for the local administration of the following services:

1. *Under the National Health Service Act*

Child Welfare and Ante-Natal Clinics.

Domiciliary midwifery and home nursing.

After-care of the sick, including such things as the social and advisory work of health visitors, the provision of sick-room equipment, and recuperative convalescent care.

The domestic help and night attendance services.

2. *Under the Mental Health Act*

Community care and general welfare work for the mentally ill and mentally subnormal (except when they are in hospitals or residential institutions).

3. *Under the National Assistance Act*

Care and welfare of old people in their own homes (but not in institutions).

Welfare of the physically handicapped.

As already mentioned, the Council will not be able to do anything which is contrary to the County Council's general policy and the estimates for the services will have to be approved by the County Council. These conditions may restrict freedom to experiment and develop, but I hope that "may" and not "will" is the correct word to use. It must be remembered that experiment on a county-wide scale is costly and difficult and that there is a great deal to be said for deliberately using a small, self-contained unit for giving a trial to new ideas, so that they may be fully explored before they are put into operation on a large scale. I believe that our local circumstances would lend themselves well to experiment and I am sure that all concerned will do their best to make any local trial projects a success.

In this connection it must be remembered that though services under the N.H.S. Act have been decentralised to Area committees and staff since 1948, work under the Mental Health Act has been kept under central control. Under delegation we shall have opportunities which have not previously existed for close local liaison with Severalls Hospital and the Royal Eastern Counties Hospital; in this field there is, I believe, a specially important challenge to the health services.

Welfare services under the National Assistance Act have hitherto, in Essex, been the work of the County Welfare Department, working separately from, though in liaison with, the Health Department. In future we have our opportunity locally to see what can be done with the health and welfare services managed by the same committee and the same professional staff; whatever may be the pros and cons of separate central administration, it is my personal view that in a place like Colchester there is a very strong case for local combination. I hope that the next few years will enable us to prove that case.

Two years ago, in my annual report, I commented that in the working out of delegation we should have to remember that Colchester could not be entirely divorced from the rest of North-East Essex in the provision of health services. The County and the Borough have agreed that the best way to obtain the right liaison with reasonable economy is to appoint to the senior posts officers who will work partly in Colchester and partly in the North-East Essex area. Further, the Borough Council accepts as an important practical fact that many people living a short distance outside Colchester have no clinic facilities in their own districts and it is assumed as a matter of course that such people will be catered for in clinics in the Borough. It is also taken for granted that the health visitors, midwives, district nurses, mental welfare officers and other medico-social workers, though their regular "districts" may be one or other side of the Borough boundary, will work closely together and may cross the boundary in either direction to give occasional help and relief to their colleagues. I am sure that the Borough's generous attitude in these matters will call forth reciprocal generosity and make for long-term harmony and successful operation of the services.

## General

The considerable degree of co-operation which the Department receives from the public and from other bodies and organisations working in parallel fields has been maintained during the year. I sometimes feel that some of the voluntary organisations in the town are rather too timid about asking for help and that if they came to us earlier with the problems which they meet the results would be better for all parties. Probably the delegation of health and welfare functions will make things easier in this respect.

I must also make a brief comment on the rather casual attitude toward infectious disease which seems to be developing in some general hospitals—a failing by no means confined to Colchester. It is only to be expected that some persons suffering from infectious diseases may be admitted to a general hospital before a diagnosis is made, but a substantial risk is taken if they are kept in a general hospital after infectious disease has been confirmed, though this is justified if the patient is literally too ill to be moved or if he needs



some highly specialised treatment which can be given only in a general hospital. There is no excuse whatever for a hospital's failing to notify cases of infectious disease; indeed there is a statutory obligation on the staff to do so. Yet the fact remains that from time to time we hear indirectly of infectious cases which have been treated in general hospitals and have not been notified and when we finally confirm the rumours it is too late to hope to carry out any useful investigations of contacts and possible sources of infection. It is true that the modern antibiotics make the cure of most of the dangerous infectious diseases much more sure and swift than it used to be, but that cannot possibly justify regarding infectious diseases as trivialities and ignoring the risks of spread.

Again I wish to thank my colleagues, both professional and administrative, for their unstinted and loyal help and particularly for the way in which they ensured that the work of the department continued at a high level during staff shortages and during my own absence on an assignment with the World Health Organisation. We all consider ourselves fortunate in our relationships with other departments and with the members of the Borough and Port Health Committee.

I remain, Mr. Mayor, Ladies and Gentlemen,

Your obedient servant,

JOHN D. KERSHAW,

*Medical Officer of Health, etc.*

# Report of the Medical Officer of Health for the year 1960

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*A Report as directed by Circular 1/61 of the Ministry of Health*

## STATISTICAL SUMMARY

<b>Population</b> (R.G. Estimate) with Military (at 30/6/60)	66,480
(Census 1951, 57,449)	
<b>Area</b> .. .. .	12,037 acres
<b>Number of inhabited houses</b> (Census 1951) ..	15,069
<b>Number of inhabited caravans</b> (Census 1951) ..	69
<b>Number of inhabited houses at 31/12/60</b> (estimated)	19,098
<b>Rateable Value</b> (1/4/60) .. .. .	£840,391
<b>Product of a penny rate</b> .. .. .	£3,410 4s. 5d.
<b>Birth Rate</b> (1,052 legitimate births, 62 illegitimate)	
(Corrected)	16·9
(Crude)	16·75
„ „ <b>England and Wales</b> .. .. .	17·1
<b>Stillbirths</b> (17) <b>Rate per thousand live and</b>	
<b>stillbirths</b> .. .. .	15·0
<b>England and Wales</b> .. .. .	19·7
<b>Death Rate per 1,000 of the population</b> (Corrected)	9·1
(Crude)	10·21
„ „ <b>England and Wales</b> .. .. .	11·5
<b>Percentage of total deaths occurring in Public</b>	
<b>Institutions</b> .. .. .	67·0
<b>Women dying in, or in consequence of, childbirth</b>	Nil
<b>Infantile mortality rate per 1,000 related live births—</b>	
<b>Legitimate</b> (17 deaths), 16·2. <b>Illegitimate</b>	
<b>(3 deaths), 48·4. Total (20 deaths)</b> .. ..	18·0
<b>Infantile Mortality Rate, England and Wales</b> ..	21·7
<b>Pulmonary Tuberculosis Death Rate</b> .. ..	0·06
<b>Other Tuberculosis Diseases Death Rate</b> .. ..	0·00
<b>Cancer Death Rate</b> .. .. .	1·7
<b>Neonatal Death Rate</b> (15 deaths) .. .. .	13·5
<b>Neonatal Death Rate, England and Wales</b> ..	15·6



# DEATHS OF CIVILIAN RESIDENTS, 1960

<i>Cause of Death.</i>	<i>M.</i>	<i>F.</i>	<i>Total.</i>
Respiratory Tuberculosis .. ..	4	—	4
Syphilitic Disease .. ..	1	1	2
Other Infections .. ..	1	—	1
Cancer, Stomach .. ..	13	9	22
„ Lung, Bronchus .. ..	17	3	20
„ Breast .. ..	—	6	6
„ Uterus .. ..	—	4	4
„ Other sites .. ..	19	38	57
Leukæmia .. ..	2	1	3
Diabetes .. ..	5	4	9
Vascular Lesions, Nervous System ..	38	67	105
Coronary Disease, Angina .. ..	69	44	113
Hypertension with Heart Disease.. ..	5	2	7
Other Heart Disease .. ..	43	60	103
Other Circulatory Disease .. ..	17	20	37
Influenza .. ..	1	—	1
Pneumonia .. ..	16	19	35
Bronchitis .. ..	18	7	25
Other Respiratory Diseases .. ..	4	2	6
Ulcer of Stomach and Duodenum .. ..	5	2	7
Gastritis, Enteritis and Diarrhœa ..	2	1	3
Nephritis and Nephrosis .. ..	7	2	9
Hyperplasia of Prostate .. ..	3	—	3
Congenital Malformations .. ..	4	1	5
Other defined diseases .. ..	21	39	60
Motor Vehicle Accidents .. ..	4	—	4
All other Accidents.. ..	8	13	21
Suicide .. ..	3	3	6
Homicide, etc. .. ..	1	—	1
	331	348	679

# 1960. DEATHS OF COLCHESTER RESIDENTS OVER 70 YEARS OF AGE

	Aged 70 and under 80	Aged 80 and under 90	Aged 90 and over	Total
Male .. ..	108	60	10	178
Female .. ..	117	91	20	228
Total .. ..	225	151	30	406

Eight persons were aged 90, five aged 91, two aged 92, two aged 93, four aged 94, three aged 95, two aged 97, one aged 98 and one aged 99. The two latter were females.

## LABORATORY, 1960

Specimen and Examination.	Positive.	Negative.	Total.
Urine, abnormalities .. ..	12	412	424
Blood, anthrax .. ..	—	2	2

Examination of cooked joint containing suspected caterpillar. Proved to be vein covered with calcined meat particles.

Examination of insect in toast. Identified as young cockroach (*Blatella Germanica*).

In addition 137 samples of water were bacteriologically examined.

	<i>Samples</i>	<i>Satisfactory</i>	<i>Unsatisfactory</i>
Town Water Supply ..	137	137	Nil

Seven samples of well water were submitted to the Counties Public Health Laboratory for chemical analysis. The result of one was regarded as showing an inferior condition for a well water. The others were considered satisfactory, although three were unsuitable for preparation of infant feeds by reason of high nitrate content.

This laboratory also examined a kettle, finding therein a deposit of copper.

Examinations by the Public Health Laboratory Service (Ipswich) numbered 12 Bacteriological (9 satisfactory, 1 fairly satisfactory and 2 unsatisfactory).

## NURSING HOMES

General and surgical beds available are 14.

There are two Homes registered in the Borough.

## PREVALENCE OF AND CONTROL OVER INFECTIOUS DISEASES

Notifiable Diseases (other than Tuberculosis) during the  
Year 1960

(Civilian and Military Cases)

Disease	Total Cases Notified	Total Cases in Age Groups												Cases admitted to Hospital
		Under 1 Year	1	2	3	4	5-9	10-14	15-19	20-34	35-44	45-64	65 and Over	
Measles .. ..	344	7	24	30	29	55	184	13	—	2	—	—	—	2
Food Poisoning	1	—	—	—	—	—	—	—	1	—	—	—	—	—
Meningococcal Infection ..	1	—	—	—	—	—	—	1	—	—	—	—	—	1
Pneumonia ..	13	—	—	1	—	—	5	—	—	3	2	—	2	1
Dysentery ..	5	2	1	—	—	—	—	—	1	1	—	—	—	4
Puerperal Pyrexia .. ..	15	—	—	—	—	—	—	—	3	9	3	—	—	—
Erysipelas ..	3	—	—	—	—	—	—	—	—	—	—	3	—	—
Scarlet Fever ..	108	1	4	8	10	17	56	10	1	1	—	—	—	1
Infectious Hepatitis ..	14	—	—	—	1	1	2	3	1	1	3	2	—	—
Suspected Food Poisoning ..	1	—	—	—	—	—	—	—	—	—	—	1	—	1
Whooping Cough	198	20	19	24	16	23	85	6	1	1	2	1	—	5
Totals ..	703	30	48	63	56	96	332	33	8	18	10	7	2	15

Deaths from notified diseases : Pneumonia 1.

Deaths from unnotified diseases : Pneumonia 19. Infective Hepatitis 1.

Total deaths from infectious diseases : 21.

Percentage of cases treated in Hospital—2·1 per cent.

During the year 69 cases of various diseases and illnesses were treated in the Isolation Hospital from the Borough of Colchester, as can be seen from the table given below:

Scarlet Fever	..	..	..	..	..	..	..	1
Whooping Cough	..	..	..	..	..	..	..	5
Pneumonia	..	..	..	..	..	..	..	1
Suspected Food Poisoning		..	..	..	..	..	..	2
Gastro-enteritis	..	..	..	..	..	..	..	2
Upper Respiratory Infection	..	..	..	..	..	..	..	1
Bronchitis	..	..	..	..	..	..	..	1
Vaccinal Encephalitis	..	..	..	..	..	..	..	1
Erythema Nodosum	..	..	..	..	..	..	..	1
Tonsillitis	..	..	..	..	..	..	..	1
Incorrect Feeding	..	..	..	..	..	..	..	1
Post tonsillectomy infection	..	..	..	..	..	..	..	1
Mumps	..	..	..	..	..	..	..	1
Otitis Media	..	..	..	..	..	..	..	1
Typhoid Fever Carrier	..	..	..	..	..	..	..	1
Meningitis	..	..	..	..	..	..	..	5
Pneumococcal Infection	..	..	..	..	..	..	..	1
Glandular Fever	..	..	..	..	..	..	..	1
Stomatitis	..	..	..	..	..	..	..	1
Salmonella contacts	..	..	..	..	..	..	..	3
Observation	..	..	..	..	..	..	..	4
Chicken Pox	..	..	..	..	..	..	..	5
Salmonella Infection	..	..	..	..	..	..	..	22
Malnutrition	..	..	..	..	..	..	..	1
Undiagnosed	..	..	..	..	..	..	..	5

All of these cases recovered.

An outbreak of Salmonella infection (Salmonellosis) due to human carriers caused 21 cases in the Colchester Maternity and Essex County Hospitals and all of these were treated in the Myland Hospital until free of infection.

Twenty-seven children and three teachers were taken ill after a school meal. Immediate investigation failed to reveal any organism responsible either in rectal swabs or in a complete meal. A check was also made of the van driver delivering the meat used in the meal as he had been off ill, but he had only had a skin rash due to food allergy and no symptoms of food poisoning. None of the cases was notified and all recovered. Handling and refrigeration were satisfactory and little evidence could be obtained as to the true cause of the sudden illness experienced by these diners.

## Tuberculosis

Age Periods	New Cases				Deaths			
	Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary	
	M.	F.	M.	F.	M.	F.	M.	F.
Under 1 .. ..	..	..	..	..	..	..	..	..
1 .. ..	..	..	..	..	..	..	..	..
2-4 .. ..	..	..	..	..	..	..	..	..
5-9 .. ..	..	..	..	..	..	..	..	..
10-14.. ..	..	..	..	..	..	..	..	..
15-19.. ..	..	..	..	..	..	..	..	..
20-24.. ..	3	2	..	..	..	..	..	..
25-34.. ..	1	..	..	..	..	..	..	..
35-44.. ..	3	1	1	..	..	..	..	..
45-54.. ..	1	..	..	..	1	..	..	..
55-64.. ..	1	..	..	..	1	..	..	..
65 and upwards	2	1	..	..	2	..	..	..
Totals .. ..	11	4	1	..	4	..	..	..

Cases of Tuberculosis dying unnotified—1.

### Tuberculosis Register

			1957	1958	1959	1960
Pulmonary Cases	..	..	310	317	331	332
Other Forms of Tuberculosis	..	..	34	33	32	33

#### *Prevention and Treatment of Tuberculosis.*

*Section 172, Public Health Act, 1936.*

#### *Prevention and Treatment of Blindness.*

*Section 176, Public Health Act, 1936.*

No action was required under the above powers.

#### *National Assistance Act, 1948.*

*Section 47.*

Three cases were investigated for possible action under the provisions of the above Act, but in each case the powers were not invoked as consent was obtained to Institutional admission.

The circumstances of the first case were very similar to cases met with before. An elderly man, living alone, with rapidly failing heart disease, had had a spell of Hospital In-patient treatment before but discharged himself against advice. He was persuaded by the medical officer of this Department to enter Hospital again and died two days after admission.



The second and third cases were very similar. Both cases concerned elderly widows living with sub-normal daughters. With the physical decline of the elders the daughters could not cope with the situation. The first one wandered away, was found by the Police, and eventually admitted to a Mental Hospital. The mother, stone-deaf, with very little vision and a twice broken leg in recent falls, and with a suspected carcinoma was asked to enter Hospital in December where the medical staff decided she needed to remain permanently. The house was filled from floor to ceiling with soiled laundry and was so offensive that only one Domestic Help was brave enough to give the old lady a meal and light her a fire until the situation got even beyond her. On removal the house was sprayed, baited for rodents, the laundry removed and cleansed and the house cleaned up by two Domestic Helps. The improvement effected was amazing.

In the third case the daughter recovered her mental balance when her mother was removed to a Mental Hospital as being the one most in need of attention. So far she has managed alone reasonably well but she still has the eye of the Mental Health Department and of this Department on her in case she runs into any kind of trouble and difficulty where we might be of assistance.

CREMATATIONS, 1960

Died in Month	Total	Residents	Non- Residents	Form F Signed by		
				Dr. Kershaw	Dr. Singer	Dr. Alderton
January ..	69	16	55	61	8	—
February ..	66	12	54	55	11	—
March ..	73	10	63	58	15	—
April ..	63	17	46	44	17	2
May ..	81	16	65	41	40	—
June ..	65	6	59	36	29	—
July ..	77	19	58	69	8	—
August ..	72	18	54	69	—	3
September	62	12	50	28	34	—
October ..	70	19	51	—	56	14
November..	77	13	64	—	51	26
December ..	81	21	60	77	—	4
Totals ..	856	179	677	538	269	49

Essex 807, Suffolk 30, London 4, Other Areas 15—Total 856.

Coroner's Cases:	January 10	April 4	July 15	October 17
129	February 9	May 14	August 11	November 10
	March 6	June 11	September 8	December 13

## *Essex County Council Act, 1933.*

Eleven establishments are registered under the above Act for massage or special treatment.

## **PET ANIMALS ACT, 1951**

Five sets of premises were registered as at 1/1/61.

## **HOUSING APPLICATIONS, 1960**

Number of applications accepted for re-housing supported by medical certificates .. .. .	125
Number of such cases re-housed during year .. .. .	151

## **MEDICAL EXAMINATIONS OF BOROUGH EMPLOYEES FOR SUPERANNUATION OR FOR ROAD TRAFFIC ACT PURPOSES DURING 1960**

Primary Examinations .. .. .	97 passed, 1 failed
Examinations after absences .. .. .	8
Examinations for other authorities .. .. .	2

## **SANITARY CIRCUMSTANCES OF THE AREA**

Two new Cesspools were authorised to be built by the Borough Engineer's Department during the year and one was done away with.

One existing well was utilised for a new dwelling house in Layer-de-la-Haye Road.

### *Water.*

The consumption per head per day, including water supplied to the Military, was 41.79 gallons. The length of pumping distribution mains is 129.769 miles. There are 578 metered supplies of water.

The number of domestic properties supplied with piped water is approximately 18,500 of which about 2 per cent are supplied from standpipes only. Some 80-100 houses still rely on well water.

The water from Lexden springs continues to be mixed with an equal proportion of borehole water from Aldham as recommended by the Counties Public Health Laboratories and whilst the resultant mixture appears to be slightly corrosive towards new copper pipes, there is no evidence that any solution of lead is taking place.

### *Main Drainage and Sewage Treatment.*

For some years it has been recognised that the post-war development in the Borough would necessitate the provision of an adequate sewerage system and of a large sewage treatment plant. In view of the intensified development taking place at present, the preparation of an overall scheme of main drainage and sewage treatment has become a matter of urgency.

The Borough Engineer is carrying out investigations and preparing preliminary schemes in connection with this provision. Enquiries have been made about the possible reception and treatment of sewage from areas outside Colchester Borough. It is likely that the Stanway and Rowhedge areas of Lexden and Winstree Rural District Council and a part of Wivenhoe Urban District Council area would be served by the proposed extensions.

In preparation of the main drainage scheme every endeavour will be made wherever possible to relieve the overloading of the existing trunk sewers by the creation of a separate system for the drainage and disposal of the surface water in the districts. It is also proposed to consider the whole main drainage system as one entity and prepare an overall scheme for relieving overloading and flooding. Such a scheme would generally be provided to meet the requirements of the Essex River Board. It is intended that no measures will be taken to relieve overloading or flooding in the existing system (other than temporary measures when the circumstances warrant immediate attention) until the comprehensive scheme is prepared and approved by the Council and the Ministry of Housing and Local Government.

It will be recognised that the sewage treatment works would require considerable extensions to deal with the sewage flows from the present and future drainage areas, it being intended that the extensions should be carried out in stages as required by additional residential and industrial development, in addition to expansion of existing industries in the works drainage area.

The investigations and the preparation of the preliminary schemes for sewerage and sewage treatment are being treated as a matter of urgency, and informal talks with the Ministry of Housing and Local Government will commence in the very near future.

### *Refuse Collection and Disposal.*

No changes in this service during the year.

### *Swimming Baths.*

There are three swimming baths in the Borough. Two of these are open-air and one indoor heated. (See Report for 1959 for full details which remain unaltered.)

## SANITARY INSPECTION

### *General Summary of Work carried out by Public Health Inspector's Department under Public Health Acts, Housing Acts, By-laws, etc.*

Defects found	..	..	..	..	..	..	2,713
Defects remedied	..	..	..	..	..	..	1,861
Factories and Workshops inspected	..	..	..	..	..	..	442

#### *Housing.*

Sinks, Waste Pipes, etc., provided or renewed	..	..	..	..	..	..	19
Floors or walls or ceilings repaired	..	..	..	..	..	..	115
Doors or windows provided or repaired	..	..	..	..	..	..	252
Ovens or firegrates repaired or renewed	..	..	..	..	..	..	13
Stairs repaired	..	..	..	..	..	..	38
Rooms cleansed	..	..	..	..	..	..	114
Roofs repaired (including rain-pipes and gutters)	..	..	..	..	..	..	102
Chimneys repaired or renewed	..	..	..	..	..	..	23
Damp houses remedied	..	..	..	..	..	..	42
Yards paved or repaired	..	..	..	..	..	..	6
Other housing repairs	..	..	..	..	..	..	10

#### *Drainage.*

Repairs and improvements	..	..	..	..	..	..	294
Water Closets provided or repaired	..	..	..	..	..	..	92
Cesspools : abolished (-), provided (-), repaired (-)	..	..	..	..	..	..	—

#### *Other Sanitary Work.*

Under Shops Act	..	..	..	..	..	..	15
Under Factories Act	..	..	..	..	..	..	66
Under Food and Drugs Act	..	..	..	..	..	..	334
Houses disinfected	..	..	..	..	..	..	1
Clothing and other articles disinfected	..	..	..	..	..	..	798
Well water sampled	..	..	..	..	..	..	15
Dustbins provided	..	..	..	..	..	..	21
Re-visits in connection with Sanitary Notices	..	..	..	..	..	..	4,403
Offensive accumulations removed	..	..	..	..	..	..	4
Matters referred to other Departments	..	..	..	..	..	..	203
Other nuisances or matters attended to	..	..	..	..	..	..	29

# **FACTORIES ACT, 1937**

Prescribed particulars on the administration of the Factories Act, 1937

## **PART I OF THE ACT**

1.—**INSPECTIONS** for purposes of provisions as to health (including inspections made by Public Health Inspectors).

Premises	Number on Register	Number of		
		Inspections	Written notices	Occupiers Prosecuted
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities	40	12	—	—
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority .. .. .	422	430	9	—
(iii) Other Premises in which Section 7 is enforced by the Local Authority (excluding out-workers' premises)	—	—	—	—
Total ..	462	442	9	—

2.—**CASES IN WHICH DEFECTS WERE FOUND**

Particulars	Number of cases in which defects were found				Number of cases in which prosecutions were instituted
	Found	Remedied	Referred To H.M. Inspector	By H.M. Inspector	
Want of cleanliness (S.1) ..	—	—	—	—	—
Overcrowding (S.2) .. ..	—	—	—	—	—
Unreasonable temperature (S.3)	—	—	—	—	—
Inadequate ventilation (S.4) ..	—	—	—	—	—
Ineffective drainage of floors (S.6)	—	—	—	—	—
Sanitary Conveniences (S.7)					
(a) insufficient .. ..	3	2	—	2	—
(b) unsuitable or defective ..	26	23	—	12	—
(c) not separate for sexes ..	—	—	—	—	—
Other offences against the Act (not including offences relating to Outwork) .. .. .	—	—	—	—	—
Total ..	29	25	—	14	—



# PART VIII OF THE ACT

## OUTWORK

(Sections 110 and 111)

Nature of Work	Section 110			Section 111		
	No. of outworkers in August list required by Sect. 110 (1) (c)	No. of cases of default in sending lists to the Council	No. of prosecutions for failure to supply lists	No. of instances of work in unwholesome places	Notices served	Prosecutions
Wearing apparel { Making, etc. .. ..	57	—	—	—	—	—
Household linen .. ..	1	—	—	—	—	—
Lace, lace curtains and nets ..	—	—	—	—	—	—
Curtains and furniture hangings ..	7	—	—	—	—	—
Furniture and upholstery .. ..	—	—	—	—	—	—
Electro-plate .. ..	—	—	—	—	—	—
File making .. ..	—	—	—	—	—	—
Brass and brass articles .. ..	—	—	—	—	—	—
Fur pulling .. ..	—	—	—	—	—	—
Iron and steel cables and chains ..	—	—	—	—	—	—
Iron and steel anchors and grapnels	—	—	—	—	—	—
Cart gear .. ..	—	—	—	—	—	—
Locks, latches and keys .. ..	—	—	—	—	—	—
Umbrellas, etc. .. ..	—	—	—	—	—	—
Artificial flowers .. ..	—	—	—	—	—	—
Nets, other than wire nets .. ..	—	—	—	—	—	—
Tents .. ..	—	—	—	—	—	—
Sacks .. ..	—	—	—	—	—	—
Racquet and tennis balls .. ..	—	—	—	—	—	—
Paper bags .. ..	—	—	—	—	—	—
The making of boxes or other receptacles or parts thereof made wholly or partially of paper .. ..	—	—	—	—	—	—
Brush making .. ..	—	—	—	—	—	—
Pea picking .. ..	—	—	—	—	—	—
Feather sorting .. ..	—	—	—	—	—	—
Carding, etc., of buttons .. ..	—	—	—	—	—	—
Stuffed toys .. ..	—	—	—	—	—	—
Basket making .. ..	—	—	—	—	—	—
Chocolates and sweetmeats .. ..	—	—	—	—	—	—
Cosaques, Christmas crackers, Christmas stockings, etc. .. ..	—	—	—	—	—	—
Textile weaving .. ..	—	—	—	—	—	—
Lampshades .. ..	—	—	—	—	—	—
Total ..	65	—	—	—	—	—

## OFFENSIVE TRADES AND KNACKER'S YARD

	Number.	Inspections.
Gut Scraper .. .. .	1	7
Tallow Melter .. .. .	1	6
Rag, Bone and Skin Dealer .. .. .	5	5
Bone Boiler .. .. .	1	6
Tripe Boiler .. .. .	1	25
Total .. .. .	9	49
Horse Slaughterer .. .. .	1	12

These occupations have been carried out satisfactorily and no complaints have been received during the year.

## COMMON LODGING HOUSE

There is one Common Lodging House in the Borough, providing accommodation for 27 lodgers. Inspections have been made on various occasions and cleansing and maintenance have been attended to satisfactorily.

## ERADICATION OF BED BUGS

Dwelling Houses Infested—Council 2, Others 7 .. ..	9
Dwelling Houses Disinfested—Council 2, Others 7 .. ..	9
Rooms in these—Infested and Disinfested .. .. .	30

In addition eight dwelling houses, including three Council houses were treated for the eradication of fleas.

Disinfestation of dwelling houses is carried out free of charge.

## RATS AND MICE

During the year 1,935 inspections and re-inspections were made by the Rodent Operators.

Three hundred and twenty-nine complaints of rat infestation were received and dealt with and altogether some 412 premises were cleared during the year.

The public sewers were treated twice during the year and poison laid in those manholes where takes of pre-bait had been recorded. Fifty-five manholes were poison baited as a result of the first treatment and thirty-six manholes as a result of the second treatment.

## WASPS' NESTS

Two hundred and ten wasps' nests were destroyed during the year.

## HOUSING

### *Statistics for the Year 1960.*

New Houses completed—364.

New Flats completed—54.

Additional units of accommodation provided by conversions .. .. .	17
-------------------------------------------------------------------	----

### *I.—Inspection.*

Number of dwelling houses inspected .. ..	872
-------------------------------------------	-----

Number of dwelling houses found to be unfit for human habitation .. .. .	36
--------------------------------------------------------------------------	----

Number of dwelling houses found not to be in all respects reasonably fit for human habitation ..	439
--------------------------------------------------------------------------------------------------	-----

II.—Number of defective houses rendered fit by Informal Action .. .. .	385
------------------------------------------------------------------------	-----

### *III.—Action under Statutory Powers.*

#### A. Under Sects. 9 and 10, Housing Act, 1957—

Number of dwelling houses in respect of which notices were served for repairs .. .. .	—
---------------------------------------------------------------------------------------	---

Number rendered fit—

(a) By owners .. .. .	—
-----------------------	---

(b) By Local Authority in default .. .. .	—
-------------------------------------------	---

#### B. Under Public Health Acts—

Number of dwelling houses in respect of which notices were served for repairs .. .. .	22
---------------------------------------------------------------------------------------	----

Number complied with—

(a) By owners .. .. .	21
-----------------------	----

(b) By Local Authority in default .. .. .	—
-------------------------------------------	---

C. Proceedings under Sections 16 and 17 of the Housing Act, 1957—

(1) Number of undertakings not to re-let given by owners .. .. .	8
(2) Number of dwelling houses in respect of which Demolition Orders were made .. ..	20
(3) Number of dwelling houses demolished in pursuance of Demolition Orders .. ..	13

D. Proceedings under Section 18 of the Housing Act, 1957 .. .. .	—
------------------------------------------------------------------	---

## RENT ACT, 1957

### *Part I—Applications for Certificates of Disrepair.*

Number of applications for certificates .. .. .	12
Number of decisions not to issue certificates .. ..	Nil
Number of decisions to issue certificates .. .. .	12
(a) in respect of some but not all defects .. ..	6
(b) in respect of all defects .. .. .	6
Number of undertakings given by landlords under paragraph 5 of the First Schedule .. .. .	6
Number of undertakings refused by Local Authority under proviso to paragraph 5 of the First Schedule .. ..	Nil
Number of Certificates issued .. .. .	5

### *Part II—Applications for Cancellation of Certificates.*

Application by landlords to Local Authority for cancellation of certificates .. .. .	3
Objections by tenants to cancellation of certificates ..	2
Decisions by Local Authority to cancel in spite of tenants' objection .. .. .	Nil
Certificates cancelled by Local Authority .. .. .	1

## INSPECTION AND SUPERVISION OF FOOD

The number of inspections of food premises and the improvements recorded are shown in the following table :

	<i>Premises</i>					<i>Inspections</i>
Slaughterhouses .. .. .	..	..	..	..	..	1,116
Bakehouses .. .. .	..	..	..	..	..	74
Dairies and Milk Shops .. .. .	..	..	..	..	..	93
Provision Shops .. .. .	..	..	..	..	..	304
Fish Shops—Wet .. .. .	..	..	..	..	..	45
Fish Shops—Fried .. .. .	..	..	..	..	..	65
Butcher's Shops .. .. .	..	..	..	..	..	231
Hotels and Restaurants .. .. .	..	..	..	..	..	313
Canteens and Hospital Kitchens .. .. .	..	..	..	..	..	93

### Repairs or improvements carried out :

Constant hot water supply provided .. .. .	..	..	..	..	..	21
Handbasins or sinks provided .. .. .	..	..	..	..	..	26
Walls—Repaired, decorated or cleansed .. .. .	..	..	..	..	..	70
Ceilings—Repaired, decorated or cleansed .. .. .	..	..	..	..	..	70
Floors—New, repaired, decorated or cleansed .. .. .	..	..	..	..	..	7
Water closets—New, repaired or cleansed .. .. .	..	..	..	..	..	31
Water closets—" Wash your hands " notices .. .. .	..	..	..	..	..	3
Refuse receptacles provided .. .. .	..	..	..	..	..	15
Extract Fans .. .. .	..	..	..	..	..	3
Refrigerators ... .. .	..	..	..	..	..	9
Nailbrushes .. .. .	..	..	..	..	..	9
First Aid Equipment .. .. .	..	..	..	..	..	11
Miscellaneous .. .. .	..	..	..	..	..	63

## SLAUGHTERHOUSES

The Slaughterhouse Report under Section 3(1) of the Slaughterhouses Act, 1958, was submitted to the Minister during the year recommending that 1st July, 1961, should be the date when the Construction Regulations should apply to all Slaughterhouses in the Borough and this date was subsequently confirmed. There are four licensed Slaughterhouses, all of which are likely to continue in regular use.

All animals slaughtered during the year were examined for evidence of disease by the Public Health Inspectors.



*Carcases and Offal Inspected and Condemned in whole or in part :*

	Cattle excluding Cows	Cows	Calves	Sheep and Lambs	Pigs	Horses
Number killed (if known) .. ..	5,073	283	322	8,160	7,764	—
Number inspected ..	5,073	283	322	8,160	7,764	—
<b>All diseases except Tuberculosis and Cysticerci :</b>						
Whole carcases condemned ..	—	1	2	4	9	—
Carcases of which some part or organ was condemned ..	1,106	39	1	49	157	—
Percentage of the number inspected affected with disease other than tuberculosis and cysticerci .. ..	21·80 %	14·13 %	·93 %	·65 %	2·14 %	—
<b>Tuberculosis only :</b>						
Whole carcases condemned ..	—	—	—	—	—	—
Carcases of which some part or organ was condemned ..	1	2	—	—	114	—
Percentage of the number inspected affected with tuberculosis ..	·02 %	·71 %	—	—	1·47 %	—
<b>Cysticercosis :</b>						
Carcases of which some part or organ was condemned ..	—	—	—	—	—	—
Carcases submitted to treatment by refrigeration ..	—	—	—	—	—	—
Generalised and totally condemned	—	—	—	—	—	—

*Parts of Carcases or Organs Condemned*

	Beasts including Cows	Calves	Sheep	Pigs	Total
	lb.	lb.	lb.	lb.	lb.
Parts of Carcases .. ..	135	—	7	1,608	1,750
Organs .. ..	11,488	1	119	447	12,055

In addition to the above, 156 lb. of Imported Beef, 50 lb. of Imported Pork, 36 lb. of Imported Pork Offal and 130 lb. of Imported Sheep offal were condemned.

The total weight of meat condemned as unfit for human consumption was:

7 tons 5 cwt. 1 qr. 7 lb.

Unsound meat was collected by a local firm engaged in the manufacture of commercial grease.

### Other Food Inspection

<i>Type of Food</i>								<i>Weight in lb.</i>
Butter .. .. .	..	..	..	..	..	..	..	2
Margarine .. .. .	..	..	..	..	..	..	..	2
Cheese .. .. .	..	..	..	..	..	..	..	8
Bacon .. .. .	..	..	..	..	..	..	..	61
Ham .. .. .	..	..	..	..	..	..	..	30
Sausages .. .. .	..	..	..	..	..	..	..	44
Brussel Sprouts .. .. .	..	..	..	..	..	..	..	5,100
Cauliflowers .. .. .	..	..	..	..	..	..	..	1,200
Potatoes .. .. .	..	..	..	..	..	..	..	1,344
Rice .. .. .	..	..	..	..	..	..	..	103
Fish .. .. .	..	..	..	..	..	..	..	1,130
Other Foods .. .. .	..	..	..	..	..	..	..	14
								<hr/> 9,038 <hr/>

The total weight of meat and other foods listed above unfit for human food and condemned was:

11 tons 6 cwt. 0 qrs. 11 lb.

In addition the following foods were condemned:

Tinned Milk .. .. .	..	..	..	..	..	..	294 Tins
Other Tinned Goods .. .. .	..	..	..	..	..	..	2,415 Tins
Packeted Foods .. .. .	..	..	..	..	..	..	580 Pkts.
Bottled Foods .. .. .	..	..	..	..	..	..	63 Bots.
Hamburgers .. .. .	..	..	..	..	..	..	14
Faggots .. .. .	..	..	..	..	..	..	3
Chickens .. .. .	..	..	..	..	..	..	15
Shrimps .. .. .	..	..	..	..	..	..	12 Galls.

All condemned food other than unsound meat was destroyed by the Cleansing Department.

**MILK AND DAIRIES ORDERS AND REGULATIONS**

There are 5 dairies and 83 distributors on the register, and during the year 93 inspections of premises were made.

*Milk (Special Designation) (Raw Milk) Regulations,  
1949-1954*

*Milk (Special Designation) (Pasteurised and  
Sterilised Milk) Regulations, 1949-1953*

*Licences issued for Sale of Graded Milk*

Pasteurised .. .. .	31
Tuberculin Tested .. .. .	23
Pasteurised, Producer .. .. .	2
Sterilised .. .. .	42
Supplementary .. .. .	21

*Pasteurised and Sterilised Milk*

During the year 152 samples of pasteurised milk and 2 samples of sterilised milk were submitted for examination and all these samples satisfied the required tests.

Of the 154 samples taken, 134 were of milk pasteurised in Colchester, the remaining 20 being of milk pasteurised or sterilised outside the Borough and brought in for retail sale.

**MILK—BIOLOGICAL TEST**

Nineteen samples of milk were submitted to the biological test for the presence of tubercle bacillus and all were negative.

**LIQUID EGG**

Seventy-nine samples of liquid egg broken out in a local establishment were taken for examination. Sixty-four were very satisfactory and fifteen showed evidence of Salmonella.

Liquid egg produced on days on which positive samples were obtained was directed for pasteurisation before being released for consumption.

# FOOD AND DRUGS ACT, 1955

Samples	No. of Samples	Samples below Standard	Nature of Deficiency
Milk .. .. .	63		
Full Cream Milk, canned ..	1		
Condensed Milk, canned ..	1		
Cream, canned .. ..	3		
Butter .. .. .	6		
Margarine .. .. .	2		
Lard .. .. .	4		
Currants .. .. .	1		
Sultanas .. .. .	1		
Mincemeat .. .. .	3		
Ground Almonds .. ..	1		
Marzipan .. .. .	1		
Coffee .. .. .	1		
Flour .. .. .	3		
Creamed Rice .. .. .	2		
Flaked Rice .. .. .	1	1	See next page
Marmalade .. .. .	1		
Jam .. .. .	5		
Jelly .. .. .	2		
Ice Cream .. .. .	8		
Soft Drink .. .. .	2		
Plums, canned .. .. .	2		
Peas, canned .. .. .	3		
Breakfast Food .. ..	1		
Bread .. .. .	4	2	See next page
Soup .. .. .	2		
Vinegar .. .. .	2		
Sauce .. .. .	2		
Tomato Ketchup .. ..	2		
Pork Roll .. .. .	1		
Steak and Kidney Pudding	1	1	See next page
Curried Beef .. .. .	1		
Curry Powder .. .. .	1		
Baking Powder .. .. .	1		
Saccharin Tablets .. ..	1		
Fish Paste .. .. .	1		
Fish Cakes .. .. .	1		
	138	4	

## OBSERVATIONS

**Flaked Rice**—A packet of Flaked Rice concerning which a complaint had been made was found to contain four live maggots, believed to be of small moths. The information was passed to the Local Authority in whose area the rice was packeted and a letter of caution sent by the Town Clerk to the firm concerned.

**Bread**—A complaint was received that a dead fly had been found in a wrapped sliced loaf. The Analyst reported that the fly had been baked with the bread. The Bakery was not in Colchester. A letter of caution was sent by the Town Clerk to the Baker.

**Bread**—A white loaf was found to contain a small piece of discoloured dough weighing about three-quarters of an ounce. The matter was taken up with the Bakery concerned.

**Steak and Kidney Pudding.** A complaint was received concerning a tinned steak and kidney pudding which contained a number of bristle-like fibres of approximately equal length—about one inch. The Analyst reported that they were bast-fibres suggestive of having originally been part of a paste brush. The matter was taken up with the wholesalers.

## LEGAL PROCEEDINGS

Proceedings were taken in connection with a food handler found smoking whilst selling open food. Fined five pounds.

### Ice Cream (Heat Treatment, etc.) Regulations

Visits to premises where ice cream is manufactured or sold	276
Samples taken .. .. .	34
Results of samples—Grade I .. .. .	27
Grade II .. .. .	1
Grade III .. .. .	4
Grade IV .. .. .	2

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